



PTO/SB/01 (6-95)

## EXPRESS MAIL LABEL NO. EL122378463US

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0010/PTO U.S. Rev. 6/95 Pate	Department of Commerce nt and Trademark Office	Attor	ney Docket Num	nber	510553	.91792						
		First	Named Inventor		Charles	J. Schaeffer						
DECLARA	ATION FOR		COMPLETE IF KNOWN									
UTILITY (	OR DESIGN	Applic	Application Number									
PATENT A	PPLICATION	Filing	Date		July 9, 1999							
Declaration	OR Declaration	Group	Art Unit		•							
X Submitted with Initial Filing	Submitted aft Initial Filing	er Exami	ner Name									
names are listed below) of	address and citizenship pinal, first and sole invent of the subject matter wh ATION OF THE SH	o are as stated tor (if only on iich is claimed HAPE/SUR	e name is listed by and for which a	patent	or an original, t is sought on the BATTERY (							
TO IMPROVE PASTE ADHESION (Title of the Invention)												
the specification of which  X is attached hereto OR  was filed on (MM/DD/YYYY)  as United States Application Number or PCT International												
Application Number	an	d was amended	on (MM/DD/YYYY)	<u></u>		(if applicable).						
I hereby state that I have revie referred to above. I acknowledge the duty to disc	wed and understand the conte	ents of the above	identified specificati		-	s amended by any amendment						
inventor's certificate or §3	65(a) of any PCT international place also identified below.	onal applicatio , by checking t	n which designate the box, any foreig	d at leas	st one country cation for paten	eign application(s) for patent or other than the United States of t or inventor's certificate, or an						
Prior Foreign Application Number(s)	Country		Foreign Filing (MM/DD/YY)	Date YY)	Priority Not Claimed	Certified Copy Attached? YES NO						
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	t under Title 35, United S			ed State		·						
Application Number	er(s) Fili	ing Date (MM/	DD/YYYY)		numbers a	provisional application re listed on a supplemental set attached hereto.						
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Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## **DECLARATION**

Page 2

I hereby claim benefit under Title 35, United States Code § 120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code § 112, 1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.															
	Parent Application Number	PC	CT Parent Number			Parent Filing Date (MM/DD/YYYY)					aren	t Pat	ent Num olicable)		
	n/a														
Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet													et attache	ed hereto	
As a nam divisional	As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:														
	Firm Name Customer or label Number														
OR  X List attorney(s) and/or agent(s) name and registration number below															
	Name			istratio umber	n				Nam	е					istration umber
Thoma Barry I J. Rod Nichol George Michae Carl R Gregor Keith I Joseph Robert	Hamilton as W. Ehrmann E. Sammons Iman Steele as J. Seay e E. Haas el J. McGovern . Schwartz ry A. Nelson M. Baxter D. Franzini n W. Bain . J. Sacco Additional attorney ect all corresponden David G. Ryse Quarles & Bra	20, 25, 25, 27, 27, 28, 29, 30, 31, 34, 35,	386 642 326 437 577 233 356 290 667	supp	Jean David Benne Micha Allen Richa Sherr Mark Jill A. Scott Danie Steve	G. Fett J. ael A. J. Mr rd T. y Wh D. Pa Fahr D. P I G. F	Ryse Bei Ja: oss Roc itne issle rland Radl Wie	er rson skols che ey er der ler etrzn	y .	ched I	Fill	in co	35,433 36,407 37,094 37,551 38,567 38,599 39,422 40,764 42,518 42,984 43,028 44,402		
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.															
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	DECLARA	ΓΙΟΝ		ADDITIONAL INVENTOR(S) Supplemental Sheet							
Name of Ad	ditional Joint Inventor, i	f any:				A petit	A petition has been filed for this unsigned inventor				
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Given Name Ch	ristian	Middle Initial	P.	Family Name	<u>'</u>	Hansen			Suffix e.g. Jr.		
Inventor's Signature								Date	·		
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X Ac	ditional inventors are bei	ng named on	suppl	emental	shee	t(s) attach	ned hereto				





Please type a plus sign (+) inside this box | + ADDITIONAL INVENTOR(S) **DECLARATION** Supplemental Sheet A petition has been filed for this unsigned inventor Name of Additional Joint Inventor, if any: Middle Initial Family Name Suffix e.g. Jr. Given Name Yu-Lin Chen ln.m.i nventor's Date Signature Residence: Menomonee Falls State WI Country USA Citizenship USA N53 W15735 Whispering Way Post Office Post Office Applicant City Menomonee Falls WI 53051 USA State Zip Country Name of Additional Joint Inventor, if any A petition has been filed for this unsigned inventor Middle Initial Family Name Suffix e.g. Jr. Given Name Dan Cantillon Inventor's Date WI USA USA Residence: Sussex State Country Citizensip Post Office N73 W24881 Micah Road Post Office Applicant Authority Zip 53089 USA Sussex WI City State Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Suffix e.g. Jr. Middle Initial n.m.i. Given Name Family Name Bart Sauer

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Inven Signa										<b>S</b> .		Date			
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Nam	ne of	Addi	tional Joint Inventor, if	any:						A pet	ition has been filed	for this	unsigned	invento	1
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